



Older Adults and Mental Health

Approximately 20 percent of Americans ages 55 and over experience specific mental disorders in any given year. The most common disorders, in order of prevalence, are:

- Anxiety disorders, such as phobias and obsessive-compulsive disorder;
- Severe cognitive impairment, including Alzheimer's disease; and
- Mood disorders, such as depression.

Schizophrenia and personality disorders are less common. However, there is evidence of underreporting of mental disorders in older adults.

Mental disorders represent a grave threat to the health and well-being of older adults. Older adults have the highest rates of suicide in the United States and while they represent only 13 percent of the population, individuals ages 65 and over account for 20 percent of all suicides. White men ages 85 and older are especially vulnerable with a suicide rate six times greater than that of the general population. Mental disorders can also negatively affect the ability of older people to recover from other health problems. Heart attacks are five times more likely to be fatal for a person who is depressed. The risk of death for nursing home residents with major depression is 60 percent higher than for residents who do not have this mental disorder.

The onset of their disorders varies widely in older adults with mental illness. Some have suffered from serious and persistent mental illness most of their adult life, while others have had periodic episodes of mental illness. Many people experience mental disorders or mental health problems for the first time late in life. Bereavement of loved ones or other losses that occur in old age frequently exacerbate these problems. Mental disorders also range in severity, from problematic, to disabling to fatal. Unfortunately, while effective treatments exist for many common mental disorders, there are still barriers to identifying and treating mental disorders in older adults.

Ageism

Many people mistakenly believe that mental disorders like depression or dementia are normal in older people and that no effective treatments are available. Another myth suggests that older people cannot change, experience psychological and spiritual growth, or contribute to society. Therefore, efforts to enhance their mental health are futile.

Stigma

Some older people believe that mental health disorders and treatment are shameful, represent a personal failure, or will lead to a loss of autonomy. They may thus deny having mental health problems or refuse treatment from mental health care providers.

Differences In Symptoms And Treatment

Mental disorders experienced by older adults may differ from those experienced by younger people, which can make accurate diagnosis and treatment difficult. For example, an older person who is depressed may be more likely to report physical symptoms such as insomnia or aches and pains rather than feelings of sadness or worthlessness. It is also important to note that many physicians and other health professionals may not provide effective mental health care because they receive inadequate training in the diagnosis and treatment of mental disorders in older adults.

Inadequate Access To Services

Many mental health or aging service providers have given inadequate attention to the mental health problems of older adults. Medicare and Medicaid provide limited benefits for mental health services. Prescription drugs, which are often an important component of mental health treatment, may be too expensive for elders on fixed incomes. In addition, transportation may not be available to get to counseling or support group appointments.

Workforce Shortages

There is a national shortage of experienced health and social service professionals trained in providing mental health care to older adults. In response, the Department of Health and Human Services has initiated several programs to improve the mental health of older people. The Surgeon General released a landmark report on mental health in 1999, and the Administration on Aging (AoA) published a supplement to this report that details some important issues in mental health and aging and innovative efforts to address them. Both publications seek to counter many myths about older persons' mental health and guide the development of policies and programs to meet the needs of older adults.

AoA's aging network provides an array of supportive services that are crucial to helping older adults with mental health needs.

AoA's Alzheimer's Disease Demonstration Grants to States foster the development of innovative models of care for people with Alzheimer's disease, their caregivers, and families. The program works through a partnership of area agencies on aging, dementia care advocates, service providers and local community agencies. Many efforts such as these focus services on hard-to-reach populations such as ethnic minorities, low-income, or rural families.

Caregivers of older people have higher-than-average rates of depression. The National Family Caregiver Support Program, established in November 2000, helps by providing:

1. Individualized information on available resources to support caregivers;
2. Assistance to families in finding services;
3. Caregiver counseling, training, and peer support;
4. Respite care; and
5. Limited supplemental services.

AoA's sister agencies within the Department of Health and Human Services provide leadership in research on mental disorders, the delivery of mental health services, and training of geriatric health experts.

The number of older people with mental health needs is expected to increase as the baby boom generation ages. AoA is committed to working in concert with other government and private organizations to enhance the mental health of older people now and in the future.

Working in close partnership with its sister agencies in the U.S. Department of Health and Human Services, the AoA is the official Federal agency dedicated to policy development, planning and the delivery of supportive home and community-based services to older persons and their caregivers. The AoA works through the national aging network of 57 State Units on Aging, 655 Area Agencies on Aging, 225 Tribal and Native organizations representing 300 American Indian and Alaska Native Tribal organizations, and two organizations serving Native Hawaiians, plus thousands of service providers, adult care centers, caregivers, and volunteers. For more information about the AoA, please contact:

U.S. Administration on Aging
Department of Health and Human Services
200 Independence Avenue, S.W.
Washington, DC 20201

Phone: (202) 619-0724
Fax: (202) 260-1012
Email: aoainfo@aoa.gov
Web: www.aoa.gov

Eldercare Locator: 1-800-677-1116, Monday – Friday, 9 a.m. to 8 p.m. ET